STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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AUG 0 1 2017

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s	Mike De	nely	/Alex K	atmbas
II. Name of lobbyist's	partnership, firm or corporat	ion, if any:		
_			110	
(Nam	ennehy 5 130 e of partnership, from or corporation	ouray,	<u></u>	
17	Depot St C (Town	aniord	NH	02201
Business Address: (Str	cet) (Town	/City)	(State)	(Zip Code)
) 228-11 (Telephone)	() 22	8-6771 (Fax)	e-mail	
II. This statement co eportable expense tra	vers: (Choose one die separa ansactions which are not attrib	te reports for eac outable to any one	h client, OR you n e client).	nay file a separate report
All reportable trans	actions occurring in the months	prior to the reporti	ing date relative to t	he following client:
	•			-
	Concerd (Full Name of Client as imprears of	on the Lobbyist Regi	istration Form)	
<u>)R</u>		, ,	,	
All reportable transa nrefated to any particu	nctions by the lobryist (including tlar client.	g the lobbyist's fan	nily), or the lobbyir	ng firm listed below which
V. Date of Report eports cover: activit	April 26, 2017 _: by from date of registration to 3/31/1		uly 26, 2017 💢 from 4/1/17 to 6/30/1	7
а	October 25, 2017 [] setivity from 7/1/17 to 9/30/17		anuary 31, 2018 [] from 10/1/17 to 12/3	1/17
. There have been this box is checked, c Concord, NH 03301.	no fees received and no repo omplete just this form and submi	ortable transact it it to the Secretar	ions made since by of State's Office,	the last report! State House, Room 204,
I. Check if additiona	l reports are attached:			
If you have receive	d fees or made expenditures, you	must file Adden	dum A- Fees and E	Expenses
If you have paid an xpense Reimbursemer	honorarium or reimbused expent	nses, you must file	Addendum B-Ro	eport of Honorariums or
If you, your firm, o	r your family has made political	contributions, you	must file Addend	um C- Political Contribution
	rmation by Lobbyist A 15-B, RSA 14-C and RSA 66 t of my knowledge and belief.	4 and hereby swea		•
Signature of lobbyist)	 	-	7-26- (Da	te)
MIKE DO	anehr_			
Print Name of lobbyis	6			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

40 to 10 1 1 4 1	
I. Name of Lobbyist(s) Mike Dennehy / A	4 Kutrubus
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership Jirm cr > (poration)	
III. Name of Client Concord Hospital	Date 1-26-17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	it relations, or public relations service
a) Total of all fees received in this reporting period	a) S 121000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ 12,000
c) Total of all fees received to date (Add lines a and b)	c) 5 24,000
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, figure, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report (Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm e aggregate total of all expenses pai expenses; (b) the aggregate total of a le: meals purchased during a busines ess than \$10 that is given to the perso- ed with a value of \$25.00 or less); an- orting period of greater than \$25,00 for ue of greater than \$25, purchase of er than \$25, but not greater than \$56, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
e) Total of all itemized expenditures reported in detail in section VI,	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	7-26-17
•	(Date)
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any Hospiteel particular client): Date of Report (check one): July 26, 2017 April 26, 2017 □ October 25, 2017 □ January 31, 2018 □ I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.